

Applicant Name: \_\_\_\_\_

## City of San Antonio

# HUMAN DEVELOPMENT SERVICES FUND APPLICATION



Also available for download on the City's website at <http://www.sanantonio.gov/rfp/hdsf.asp>

## **I. Human Development Services Fund (HDSF) Overview**

Through the Human Development Services Fund (HDSF), the City of San Antonio seeks to support the City Council priorities of Family Strengthening, Youth Development, Workforce Development, and Community Safety Net. The Mayor and City Council members are allocated General Fund dollars each year for their HDSF budget. The budgeted amount varies depending on the adopted budget.

## **II. Who is eligible to receive HDSF funding?**

Generally, the applicant for HDSF funding must be a provider of services that principally address community needs of the people of the City of San Antonio. More specifically, the applicant must be one of the following in order to receive funding support from the HDSF:

1. A City of San Antonio department that wishes to engage in a project that serves a municipal public purpose.
2. A non-profit entity that: a) is able to show proof at the time of application for HDSF funding of having filed for tax exempt status as determined by the Internal Revenue Service under section 501(c)(3) of the United States Internal Revenue Code or be an affiliate of a corporation having a not-for-profit status in Texas or elsewhere in the United States that has achieved tax exempt status; b) is able to show proof of exemption from franchise taxes by the Texas State Comptroller at the time of application for HDSF; and c) demonstrates, in the case of services, programs or events, that the proposed services, programs and events funded by HDSF will be open to the public.
3. A neighborhood association or other legally formed entity whose purpose as stated in its organizational documents is defined as serving the community.
4. Another governmental entity, such as a municipality, county, school district, or other political subdivision of the State of Texas, who is requesting HDSF funding for a project for which it is not responsible to carry out under its own charter or mandates by state or federal law, unless it involves a joint project with the City. (Example: HDSF cannot be expended to purchase materials directly for a school district for student instruction during normal school hours.)

## **III. Who is ineligible to receive HDSF funding?**

1. Individuals
2. Applicants that have been in operation and providing the services for which funding is requested for less than one year, if the request for HDSF funding exceeds \$5,000.00

## **IV. What type of project or expenditure is eligible for HDSF funding?**

See the table that follows for the goals, eligible projects and expenditures for HDSF funding.

**HDSF funding initiatives, projects, and expenditures are as follows:**

Initiatives and Municipal Public Purpose Served	Eligible Projects	Eligible Expenditures
<p><b><u>Initiative: Family Strengthening</u></b> Families will achieve economic success through financial literacy, personal savings and debt reduction. By serving as their child's first and most important teacher, parents will ensure their children are fully prepared for school, schools are ready for children, and the community supports school readiness activities.</p> <p><b><u>Municipal Public Purposes Served:</u></b></p> <ul style="list-style-type: none"> <li>- Promoting the health, safety and welfare of the community</li> <li>- Promoting family, social and economic stability</li> <li>- Supporting community education to youth, elderly, low income and disabled persons</li> </ul>	<p>Assistance to prevent child abuse and neglect; parent involvement education; family literacy; school readiness; direct child care assistance; financial literacy initiatives; financial security and public assistance benefit outreach.</p>	<ul style="list-style-type: none"> <li>• Events</li> <li>• equipment</li> <li>• supplies</li> <li>• direct child care</li> <li>• Individual Development Account (IDA) local matching funds made in accordance with all federal law.</li> </ul>
<p><b><u>Initiative: Youth Development</u></b> Provide recreational, learning opportunities and character traits training that builds resiliency and increases the overall developmental assets of youth. Encourage high school students to graduate on time.</p> <p><b><u>Municipal Public Purposes Served:</u></b></p> <ul style="list-style-type: none"> <li>- Supporting community recreation to youth, elderly, low income and disabled persons</li> <li>- Providing education and training for the community</li> <li>- Advertising the advantages of the City</li> <li>- Promoting the professional needs of the City</li> <li>- Preparing the workforce for productive employment</li> </ul>	<p>Mentoring services, academic enrichment; life skills training, mentoring, and career exploration; delinquency prevention; character traits education; community service opportunities; and recreational and summer / after school programs.</p>	<ul style="list-style-type: none"> <li>• Events</li> <li>• equipment</li> <li>• supplies</li> </ul>
<p><b><u>Initiative: Workforce Development</u></b> Raise the education and skill level of San Antonio's workforce.</p> <p><b><u>Municipal Public Purposes Served:</u></b></p> <ul style="list-style-type: none"> <li>- Providing education and training for the community</li> <li>- Advertising the advantages of the City</li> <li>- Promoting the professional needs of the City</li> <li>- Preparing the workforce for productive employment</li> </ul>	<p>Adult literacy; transitional job training; post secondary education; skilled job training; and enrichment services.</p>	<ul style="list-style-type: none"> <li>• Events</li> <li>• equipment</li> <li>• supplies</li> <li>• scholarships for higher education that provide for tuition, fees and other costs associated with attending an institution of higher learning for the purpose of obtaining a degree or certificate</li> <li>• Individual Development Account (IDA)</li> </ul>
<p><b><u>Initiative: Community Safety Net</u></b> Enhances and ensures continuation of the community safety net to promote the overall health and independence of residents in our community.</p> <p><b><u>Municipal Public Purposes Served:</u></b></p> <ul style="list-style-type: none"> <li>- Supporting community recreation to youth, elderly, low income and disabled persons</li> <li>- Prevention of homelessness</li> <li>- Promoting the health, safety and welfare of the community</li> <li>- Providing neighborhood revitalization to the community</li> </ul>	<p>Services for emergency assistance, crisis intervention, to prevent or end hunger, homelessness, domestic violence; elderly and disabled services; substance abuse prevention; health related programs; neighborhood watch programs; efforts to promote neighborhood involvement; neighborhood clean-up on public property or as part of an official City program</p>	<ul style="list-style-type: none"> <li>• Events</li> <li>• equipment</li> <li>• supplies</li> </ul>

## V. What is ineligible for HDSF funding?

HDSF funding may not be used for:

- a) Any sectarian or religious facility or activity;
- b) Projects funded by the City and therefore deemed duplicative in nature as determined by the Director of the Department of Community Initiatives;
- c) Arts projects not directly supporting an HDSF municipal public purpose as established by this Ordinance;
- d) Services which are primarily commercial in nature;
- e) Programs devoted primarily to political advocacy;
- f) Permanent improvements to any non-City owned structure or property so that it becomes an integral part of the real property and its removal would do harm to the building or land, including those improvements that are bolted, nailed, screwed or wired into the wall, ceiling or floor;
- g) Allocations made for the primary benefit of an individual;
- h) Services and/or product must not be subject to any proprietary interest;
- i) General operating expenses or expenses to support an on-going operation of the service provider, including, but not limited to, salaries, utilities, rent and regular administrative expenses;
- j) Funding to support other governmental entities in carrying out functions mandated by their charter or statute, except for joint projects where City programs are also involved;
- k) Funding for tuition at private primary or secondary schools;
- l) Funding to support events that have a sole or primary purpose of fundraising;
- m) Allocations for the purchase or lease of motor vehicles unless purchased by a City department for use by the City in a human development capacity;
- n) Allocations for the purchase of clothing or apparel that will be owned by an individual unless a part of a workforce program;
- o) Funding for out of town travel unless the traveler is representing the City of San Antonio in their travels;
- p) Funding to support the project of an organization deemed ineligible by the Department of Community Initiatives to receive HDSF due to a violation of the policies, rules or guidelines for HDSF.

## VI. The HDSF Process

**Step 1: Applicant:** Applicants for HDSF Funding (proposed Service Providers) reviews HDSF Application and Contract thoroughly and submits the original completed HDSF Application along with all accompanying forms to the Mayor/Council District Office at the following address:

Mayor or Council District \_\_\_\_\_ (number)  
City of San Antonio P.O. Box 839966  
San Antonio, Texas 78283-3966

**\* Note:**

- *Completed application packets will be accepted by the Council District or Mayor's office at any time throughout the fiscal year.*
- *City wide projects may be supported by multiple council districts. In the event that funding from more than one council district is sought, the Applicant should submit separate applications to each Council District Office and the Mayor's Office.*
- *The submission of an application does not commit the City to enter into a contract, award any funds related to the application, nor does it obligate the City to pay any costs incurred in preparation or submission of an application or in anticipation of a contract.*
- *Applicant must submit documentation supporting expenditures prior to August 31<sup>st</sup> in order to receive the funding awarded prior to close of the current fiscal year; otherwise, Applicant may be reimbursed at the start of the next fiscal year if funds have been carried over and are available.*

**Step 2: Mayor or Councilperson, as applicable:** The Mayor or a Councilperson or their designee, as applicable, after having reviewed the HDSF application, forwards the completed Application along with a memorandum to the Director of the Department of Community Initiatives authorizing the HDSF allocation amount to a selected Applicant.

**Step 3: Department of Community Initiatives:** Upon receipt of (i) the completed HDSF Application and all accompanying forms and attachments; and (ii) the memorandum indicating authorization from the Mayor or Council District Office, as applicable, the Department of Community Initiatives verifies whether the expenditure is allowable and the funds are available.

**Step 4: Department of Community Initiatives / Applicant:** The Applicant is notified of the HDSF funding request approval and a copy of the proposed contract is emailed or mailed to the Applicant. The Department of Community Initiatives then coordinates with the Applicant (i.e., Service Provider) the execution and return of a final contract. Applicant is advised that failure to return an original signed contract by the Applicant, who is authorized to legally enter into contract with the City, within thirty (30) days after mailing by the City, may result in reallocation of available funds to another eligible entity.

**Step 5: Department of Community Initiatives:** Once an Applicant has delivered one original signed Contract to the Department of Community Initiatives, the Director of the Department of Community Initiatives signs the Contract, at which time the Contract is considered fully executed and a copy will be provided to you, the Applicant. Only signed contracts in original form will be accepted.

Please deliver original contracts and invoices to:

Department of Community Initiatives  
c/o HDSF Liaison  
City of San Antonio  
P.O. Box 839966  
San Antonio, Texas 78283-3966

**Step 6: Applicant:** The Department of Community Initiatives then coordinates and monitors funding to the approved HDSF Applicant (i.e. Service Provider) on a reimbursement basis. The approved HDSF Applicant (i.e., Service Provider) submits all receipts / proofs of payment to the Department of Community Initiatives for those one-time events and purchases which are authorized by the HDSF Contract. The deadline for submission of the receipts / proofs of payment August 31<sup>st</sup> in order to receive the funding awarded prior to close of the current fiscal year; otherwise, Applicant may be reimbursed at the start of the next fiscal year if funds have been carried over and are available.

*\*Note: Applicant shall be required to complete and submit additional forms such as an Expenditure Statement Form and Vendor Master Creation Request Form, which will be made available following application approval and full execution of the contract. If an applicant needs to create or update their vendor information in SAP, a delay in processing application may occur.*

**Step 7: Department of Community Initiatives:** The Department of Community Initiatives sends Requests for Payment to the City's Finance Department once receipts / invoices are received from the approved HDSF Applicant (i.e., Service Provider).

**Step 8: Finance Department:** The Finance Department prepares a check and mails the check to the approved HDSF Applicant (i.e., Service Provider). The City reserves up to thirty (30) days to issue payment to HDSF Applicant (i.e., Service Provider).



## VII. Application Instructions and Checklist

NOTE: The Application and all attachments must be fully completed in blue or black ink and must have original signatures in order to be eligible for approval and processed. **Failure to complete the Application and all attachments in blue or black ink, failure to include original signatures or failure to provide all requested documents and attachments will delay the processing of the application.**

	INSTRUCTION	DOCUMENT LABEL	Check (✓) if completed
1.	Complete one (1) Human Development Services Fund (HDSF) <u>Application</u> ( <i>original signature required</i> )	Application	_____
2.	Complete and attach a <u>Board Roster</u> ( <i>a list of board members and their contact information</i> ) following the page labeled "Attachment A"	Application - Attachment A	_____
3.	Complete and attach a <u>Fact Sheet</u> ( <i>which describes the purpose or mission of the organization, the services that the organization offer, the name and description of the project or program for which funds are being requested</i> ) following the page labeled "Attachment B"	Application - Attachment B	_____
4.	Attach the organization's <u>Verification of Federal Tax Identification Number</u> ( <i>e.g., a copy of the IRS determination letter granting 501(c)(3) status; social security number, etc.</i> ) following the page labeled "Attachment C"	Application - Attachment C	_____
5.	Complete and attach an <u>Internal Revenue Service Taxpayer Identification Number and Certification</u> form (Substitute W-9 Form)	Application - Attachment D	_____
6.	Complete and attach a <u>Discretionary Contracts Disclosure</u> form ( <i>original signature required</i> )	Application - Attachment E	_____
7.	Submit Application and its attachments to the applicable Council District Office (If funding is sought from multiple districts, applicant should submit separate applications to each Council District Office and the Mayor's Office.)	N/A	_____



**CITY OF SAN ANTONIO  
HUMAN DEVELOPMENT SERVICES FUND (HDSF) APPLICATION**

City Council District: \_\_\_\_\_ \*Total Amount Requested by Applicant:\$ \_\_\_\_\_

*\*Applicant understands and agrees that the actual amount awarded to Applicant may be less than that which Applicant requested and the final, actual award shall be set forth in the HDSF contract signed by Applicant.*

Legal Name of Applicant Organization: \_\_\_\_\_

Name and title of authorized representative of Applicant: \_\_\_\_\_

Project Name: \_\_\_\_\_ hereinafter referred to as “the Project”

Applicant

Address: \_\_\_\_\_  
Number Street Name Zip Code

E-mail Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Please indicate below how these funds will be spent by eligible expenditure:

\*\*\*\*\*

Dollar Amount Requested for **Community Event**: \$ \_\_\_\_\_

Name and description of the Event:

\_\_\_\_\_

Date of the Event: \_\_\_\_\_

Is the event open to the public? \_\_\_\_\_ (If yes, please answer the questions below)

Is there participant fee? \_\_\_\_\_ If yes, can fee be waived? \_\_\_\_\_ Fee: \_\_\_\_\_

\*\*\*\*\*



Dollar Amount Requested for **Supplies / Equipment**: \$ \_\_\_\_\_

If the Service Provider is purchasing equipment / supplies, are services provided to the public? \_\_\_\_\_

Please provide a detailed list below of the supplies and equipment to be purchased and the approximate cost of each item (*please do not use name brands in description*):

_____ \$ _____	_____ \$ _____
_____ \$ _____	_____ \$ _____
_____ \$ _____	_____ \$ _____

*Please attach a separate sheet if you require additional space to list items.*

\*\*\*\*\*  
Dollar Amount Requested for **Scholarships**: \$ \_\_\_\_\_

Name of Scholarship \_\_\_\_\_

Fund: \_\_\_\_\_

Is this an annual Scholarship? \_\_\_\_\_

Number of scholarships to be awarded: \_\_\_\_\_ Dollar amount per award: \$ \_\_\_\_\_

\*\*\*\*\*

Dollar Amount Requested for **Direct Child Care**: \$ \_\_\_\_\_

Name of Child Care Program: \_\_\_\_\_

How many children will be served? \_\_\_\_\_ Cost per child: \$ \_\_\_\_\_

Is there participant fee? \_\_\_\_\_ If yes, can fee be waived? \_\_\_\_\_ Fee: \$ \_\_\_\_\_

\*\*\*\*\*

Dollar Amount Requested for **Individual Development Account**: \$ \_\_\_\_\_

Program Type: \_\_\_\_\_

How many individuals will be served? \_\_\_\_\_ Cost per individual: \$ \_\_\_\_\_

Is there participant fee? \_\_\_\_\_ If yes, can fee be waived? \_\_\_\_\_ Fee: \$ \_\_\_\_\_

*For Council District Office use only:*

Approved Funding for Community Event:	\$ _____
Approved Funding for Supplies / Equipment:	\$ _____
Approved Funding for Scholarships:	\$ _____
Approved Funding for Vehicle:	\$ _____
Approved Funding for Direct Child Care	\$ _____

**Total Amount Approved:** \$ \_\_\_\_\_

**Council District Contact:** \_\_\_\_\_

#### **Acknowledgement:**

The undersigned by his or her signature below represents that the information provided in this HDSF Application and its attachments is true and accurate and that he/she has reviewed and is authorized to bind the Applicant Organization to fully comply with the HDSF Contract, which includes terms and conditions associated with the award of funds. Additionally, the undersigned by his or her signature below understands and agrees that (i) the submission of an application does not commit the City to enter into a contract, award any funds related to the application, nor does it obligate the City to pay any costs incurred in preparation or submission of an application or in anticipation of a contract; (ii) the City may deny an application if it finds that the information provided herein is false or inaccurate; (iii) the actual amount awarded to Applicant may be less than that which Applicant requested and the final, actual award shall be set forth in the HDSF contract signed by Applicant; (iv) the information provided by Applicant in this Application shall be used by City representatives to complete the HDSF Contract; (v) certain terms or conditions of this HDSF Application/Contract may be modified by the City of San Antonio prior to the City's execution of the HDSF Application/Contract and hereby agrees that by signing the Contract and by accepting any funds or other benefits from the City in connection with said contract, that it fully accepts all terms and conditions as set forth and/or modified by the City.

*\*\*Note: Advanced payments will be considered on a case by case basis. All requests for an advanced payment must be approved by the DCI Director. Additional documentation will be required for advance payment consideration.*

*(To Be Completed By Applicant)*

This HDSF Application has been signed on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Legal Name of Applicant Organization

By: \_\_\_\_\_  
Authorized Signer for Applicant

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_



**CITY OF SAN ANTONIO  
HUMAN DEVELOPMENT SERVICES FUND (HDSF) APPLICATION**

**Attach Agency Board Roster**

**(Provide list of board members and their contract  
information)**



**CITY OF SAN ANTONIO  
HUMAN DEVELOPMENT SERVICES FUND (HDSF) APPLICATION**

**Attach Agency Fact Sheet**

**(Describe the purpose or mission of the organization, the services that the organization offers along with the name of the project and program description for which funds are being requested)**



**CITY OF SAN ANTONIO  
HUMAN DEVELOPMENT SERVICES FUND (HDSF) APPLICATION**

**Attach Organization Verification of Federal Tax  
Identification Number**

**(e.g. a copy of the IRS determination letter granting  
501(c)(3) status)**



For Office Use Only
Vendor Number
1099 YES <input type="checkbox"/> NO <input type="checkbox"/>

# Application - Attachment D

## Internal Revenue Service Request for Taxpayer Identification Number and Certification (Substitute W-9 Form)

Please complete the following information. We are required by Section 6109 of the Internal Revenue Code to obtain this information when making reportable payments to you. You may be subject to a 31% withholding of future payments if this information is not provided. Additionally, if you fail to provide this information, you may be assessed a \$50.00 penalty imposed by the Internal Revenue Service under Section 6723 of the Internal Revenue Code.

**If you are completing this form for the HDSF Application Packet, please include it the packet.**

1. Select your tax status as reported to the Internal Revenue Service (IRS).

- ☐ a. Individual
- ☐ b. Sole Proprietorship
- ☐ c. Partnership
- ☐ d. Corporation

2. Fill in your name(s) and/or business name and the complete mailing address as filed with the Internal Revenue Service

Telephone number \_\_\_\_\_

Owner(s) \_\_\_\_\_

Business or Trade Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

3. Provide your Tax Identification Number (TIN) and/or Social Security Number (SSN) as filed with the IRS.

TIN															
SSN															

**EXEMPTIONS: If exempt from 1099 reporting, please circle or check your qualifying exemption below, however we are required to have this form on file.**

- ☐ 1. Corporation (payments for medical services are excluded)
- ☐ 2. Exempt from tax under section 501(a) of IRC (including religious, charitable, & educational foundation)
- ☐ 3. The United States or any of its agencies or instrumentalities (including any political subdivisions)
- ☐ 4. A real estate investment trust
- ☐ 5. A common trust fund operated by a bank under Section 584 (a)
- ☐ 6. A financial institution
- ☐ 7. Other

**CERTIFICATION:** I certify under penalty of perjury that the Tax Identification Number I have provided is correct.

**SIGNATURE**

**DATE**

**PRINTED NAME**

**TITLE**



**City of San Antonio**  
**Discretionary Contracts Disclosure**

*For use of this form, see [Section 2-59 through 2-61 of the City Code \(Ethics Code\)](#)  
Attach additional sheets if space provided is not sufficient.*

(1) Identify any individual or business entity<sup>1</sup> that is a **party** to the discretionary contract:

(2) Identify any individual or business entity which is a **partner, parent** or **subsidiary** business entity, of any individual or business entity identified above in Box (1):

☐ **No partner, parent or subsidiary; or**

**List partner, parent or subsidiary of each party to the contract and identify the corresponding party:**

(3) Identify any individual or business entity that would be a **subcontractor** on the discretionary contract.

☐ **No subcontractor(s); or**

**List subcontractors:**

(4) Identify any **lobbyist** or **public relations firm** employed by any party to the discretionary contract for purposes related to seeking the discretionary contract.

☐ **No lobbyist or public relations firm employed; or**

**List lobbyists or public relations firms:**

<sup>1</sup> A *business entity* means a sole proprietorship, partnership, firm, corporation, holding company, joint-stock company, receivership, trust, unincorporated association, or any other entity recognized by law. A sole proprietor should list the name of the individual and the d/b/a, if any.

**(5) Political Contributions**

List all political contributions totaling one hundred dollars (\$100) or more within the past twenty-four (24) months made to any current or former member of City Council, any candidate for City Council, or to any political action committee that contributes to City Council elections, by any individual or business entity whose identity must be disclosed under Box (1), (2), (3) or (4) above, or by the officers, owners of any business entity listed in Box (1), (2) or (3):

☐ **No contributions made; If contributions made, list below:**

By Whom Made:	To Whom Made:	Amount:	Date of Contribution:

**(6) Disclosures in Proposals**

Any individual or business entity seeking a discretionary contract with the city must disclose any known facts which, reasonably understood, raise a question<sup>2</sup> as to whether any city official or employee would violate [Section 2-43 of the City Code \(Ethics Code\)](#), ("conflicts of interest") by participating in official action relating to the discretionary contract.

☐ **Party not aware of facts which would raise a "conflicts-of-interest" issue under Section 2-43 of the City Code; or**

**Party aware of the following facts:**

*This form is required to be supplemented in the event there is any change in the information before the discretionary contract is the subject of council action, and no later than five (5) business days after any change about which information is required to be filed, whichever occurs first.*

<b>Signature:</b>	<b>Title:</b>  <b>Company or D/B/A:</b>	<b>Date:</b>
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<sup>2</sup> For purposes of this rule, facts are "reasonably understood" to "raise a question" about the appropriateness of official action if a disinterested person would conclude that the facts, if true, require recusal or require careful consideration of whether or not recusal is required.